

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>11.8.02</u>		2 Serial/Patent # <u>09/322,114</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
<input checked="" type="checkbox"/>	Filing (RCE)	#5	10.1.02	\$ 1442.							
<input type="checkbox"/>	Amendment			\$							
<input type="checkbox"/>	Extension of Time			\$							
<input type="checkbox"/>	Notice of Appeal/Appeal			\$							
<input type="checkbox"/>	Petition			\$							
<input type="checkbox"/>	Issue			\$							
<input type="checkbox"/>	Cert of Correction/Terminal Disc.			\$							
<input type="checkbox"/>	Maintenance			\$							
<input type="checkbox"/>	Assignment			\$							
<input type="checkbox"/>	Other			\$							
			7 TOTAL AMOUNT OF REFUND	\$ 1442.							
10 REASON:		8 TO BE REFUNDED BY:									
Overpayment		<input checked="" type="checkbox"/> Treasury Check									
Duplicate Payment		<input type="checkbox"/> Credit Deposit A/C #:									
No Fee Due (Explanation):		9 <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px;">2</td> <td style="width: 20px;">3</td> <td style="width: 20px;">--</td> <td style="width: 20px;">0</td> <td style="width: 20px;">0</td> <td style="width: 20px;">8</td> <td style="width: 20px;">5</td> </tr> </table>			2	3	--	0	0	8	5
2	3	--	0	0	8	5					
Improper RCE											
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: _____			TITLE: <u>PS</u>								
SIGNATURE: <u>Patricia Bond</u>			PHONE: <u>308-6911</u>								
OFFICE: <u>Office of Petitions</u>											
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****											
APPROVED: <u>Alison Kelly</u>			DATE: <u>11/12/02</u>								

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: